Revised 06/08

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A DES MOINES, IA 50319 Fax: (515)281-4073 www.iowa.gov/ethics

Reset Form

lowa Code section 8.7 requires all gifts and bequests given to any department of the state of or received by the Governor on behalf of the state be reported to the lowa Ethics and Campa Disclosure Board and the Government Oversight Committee. The Board will provide a copy this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

FORM-GB

Gift or Bequest information received by a department or accepted by the Governor on behalf of the state

Date			
Nov 2			
that the li	nformation concerning the donor and	•	
ernor on behalf of the state.			
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"fair market value" of item as determined by it or office. If no value mark "0,00".			
est Amount/Value*			
	\$45.00		
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none Number (if different from above)			
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DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUES	5T:		
Governor's Office			
Name of Department or Office 1007 E Grand Ave Des Moines, IA 50319			
Malling Address C (515) 725-3517	City, Stale, Zip Code		
Area Code & Telephone No.			
CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFIC	CE;		
Megan Hall			
Name			
Mailing Address (if different from above) mwgan.hall@iowa.gov	City, State, Zip (If different from above)		
Email Address	Area Code & Telephone Number (if different from above)		
OONOR OF GIFT OR BEQUEST:			
Luca Berrone (General Manager) Sacmi USA Group Name			
3434 106th Circle Des Moines, IA 50322			
Mailing Address City, State, Zip Code	6 Nov 18 \$45.00		
(515) 276-2052	Date of Gift or Bequest Amount/Value*		
Area Code & Telephone Number	*value is defined as *fair market value" of item as determined by		
luca@sacmiusa.com Email Address (optional)	receiving department or office. If no value mark "0.00".		
Provide a description of the gift or bequest and purpose thereof:			
Aged Aceto Balsamico			
Criteria to use this form:			
Receipt of any gift or bequest that is received by any department of the	state or received by the Governor on behalf of the state,		
	·		
MANAGEM			
tatement of Affirmation:			
Megan Hall affirm that the gift or bequest reported above	ve is accurate. I further affirm that the information concerning the donor and		
sessment of the fair market value (if applicable) is correct and true to the	best of my knowledge.		